Hertfordshire’s Director of Public Health
Annual Report 2018/19

A summary of the health of our population across the county
Welcome to my Annual Report for 2018/19! It provides a snapshot of the state of our population’s health – both in Hertfordshire as a whole and in the county’s ten districts and boroughs.

There’s also a supplement containing charts for each of the indicators in Public Health England’s local Health Profiles, showing how we compare with similar local authorities and how our districts and boroughs compare with Hertfordshire as a whole.
Hertfordshire’s Public Health Service

About us

our profile

Sitting within Hertfordshire County Council, we have around 65 staff working across the three domains of public health: health improvement, health protection and healthcare public health.

our mission

To work to with our partners and stakeholders across the system to improve health outcomes and reduce inequalities in Hertfordshire.

our vision

A healthy and happy Hertfordshire: every resident is born as healthy as possible and lives a full, happy, healthy life.
Hertfordshire’s population
Our county overall is…

**Large**
Hertfordshire has a mix of urban and rural communities, with over 1.1 million residents living in a range of large and new towns, market towns and villages.

**Well-off**
Hertfordshire is relatively affluent and benefits from a thriving economy and highly skilled working age population.

**Unequal**
Although the general standard of living is high, there are pockets of deprivation across all ten of Hertfordshire’s districts and significant variations in outcomes between districts.

**Ageing**
The proportion of older people in Hertfordshire is increasing and this is set to continue over the next 20+ years, bringing new challenges for the health and social care sectors.
The health of our population by local authority area

Clickable chapter list

1. Hertfordshire County Council
   Page 7

2. Broxbourne Borough Council
   Page 12

3. Dacorum Borough Council
   Page 17

4. East Hertfordshire District Council
   Page 22

5. Hertsmere Borough Council
   Page xx

6. North Hertfordshire District Council
   Page 32
The health of our population by local authority area

Clickable chapter list

7 St Albans City & District Council
Page 37

8 Stevenage Borough Council
Page 42

9 Three Rivers District Council
Page 47

10 Watford Borough Council
Page 52

11 Welwyn Hatfield Borough Council
Page 57
The health of our population: Hertfordshire County Council
The health of our population: Hertfordshire
Overview

Health in summary

The health of people in Hertfordshire is generally better than the England average.

Hertfordshire is one of the 20% least deprived counties/unitary authorities in England; however, about 11% (24,800) of children live in low income families.

Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 7.2 years lower for men and 5.4 years lower for women in the most deprived areas of Hertfordshire than in the least deprived areas.

Stevenage and Watford generally tend to have poorer health outcomes than other districts in the county.
The health of our population: Hertfordshire

Key numbers

- **Smoking in pregnancy**: 805 new mothers were smokers at the time of delivery in 2016/17
- **Diabetes**: 28.5% of diabetics aged 17+ were estimated to be undiagnosed in 2017
- **Childhood obesity**: 1,881 schoolchildren in Year 6 were obese in 2016/17
- **Self-harm**: There were 1,215 emergency hospital admissions for intentional self-harm in 2016/17
- **Physical activity**: 31.5% of adults (aged 19+) were not physically active in 2016/17
- **Hip fractures**: There were 1,225 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: Hertfordshire
Statistically significant trends in key indicators

Getting better

- Cancer diagnosed at early stage
- Smoking status at time of delivery
- Under 18 conceptions
- Children in low income families (under 16s)
- Employment rate (aged 16-64)
- New sexually transmitted infections (STIs)

Getting worse

- Obese children (aged 10-11)
- Violent crime
The health of our population: Hertfordshire
Key improvements to aim for

- Increasing physical activity and tackling child obesity
- Reducing violent crime
- Reducing smoking in vulnerable groups
- Diagnosing unrecorded diabetes
The health of our population: Broxbourne Borough Council
The health of our population: Broxbourne

Overview

Health in summary

The health of people in Broxbourne is generally better than the England average.

About 15% (2,800) of children live in low income families.

Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 7.7 years lower for men and 4.5 years lower for women in the most deprived areas of Broxbourne than in the least deprived areas.

Waltham Cross and Rosedale & Bury Green wards experiences a number of poorer health outcomes than other wards in the borough.
The health of our population: Broxbourne

Key numbers

**Smoking in pregnancy**
- 69 new mothers were smokers at the time of delivery in 2016/17

**Diabetes**
- 25.9% of diabetics aged 17+ were estimated to be undiagnosed in 2017

**Childhood obesity**
- 216 schoolchildren in Year 6 were obese in 2016/17

**Self-harm**
- There were 82 emergency hospital admissions for intentional self-harm in 2016/17

**Physical activity**
- 36.1% of adults (aged 19+) were not physically active in 2016/17

**Hip fractures**
- There were 100 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: Broxbourne
Statistically significant trends in key indicators

Getting better
- Cancer diagnosed at early stage
- Children in low income families (under 16s)
- Under 18 conceptions

Getting worse
- Violent crime
- Employment rate (aged 16-64)
The health of our population: Broxbourne
Key improvements to aim for

- Increasing physical activity and tackling child obesity
- Reducing violent crime
- Reducing smoking in vulnerable groups
- Reducing unemployment
The health of our population: Dacorum Borough Council
The health of our population: Dacorum
Overview

Health in summary

The health of people in Dacorum is generally better than the England average.

About 12% (3,300) of children live in low income families.

Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 7.8 years lower for men and 5.1 years lower for women in the most deprived areas of Dacorum than in the least deprived areas.

Several wards, including Grovehill, Highfield, Hemel Hempstead Town and Adeyfield West, experience a number of health outcomes than the borough as whole.
The health of our population: Dacorum
Key numbers

**Smoking in pregnancy**
99 new mothers were smokers at the time of delivery in 2016/17

**Diabetes**
31.2% of diabetics aged 17+ were estimated to be undiagnosed in 2017

**Childhood obesity**
222 schoolchildren in Year 6 were obese in 2016/17

**Self-harm**
There were 182 emergency hospital admissions for intentional self-harm in 2016/17

**Physical activity**
27.7% of adults (aged 19+) were not physically active in 2016/17

**Hip fractures**
There were 161 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: Dacorum
Statistically significant trends in key indicators

Getting better

• Cancer diagnosed at early stage
• Children in low income families (under 16s)
• Smoking status at time of delivery
• Under 18 conceptions
• New sexually transmitted infections (STIs)
• Employment rate (aged 16-64)

Getting worse

• Violent crime
• Statutory homelessness
The health of our population: Dacorum

Key improvements to aim for

- Increasing physical activity
- Reducing violent crime
- Reducing smoking in vulnerable groups
- Diagnosing unrecorded diabetes
The health of our population: East Hertfordshire District Council
Health in summary

The health of people in East Hertfordshire is generally better than the England average.

East Hertfordshire is one of the 20% least deprived districts/unitary authorities in England; however, about 8% (2,100) of children live in low income families.

Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 4.8 years lower for men and 4.9 years lower for women in the most deprived areas of East Hertfordshire than in the least deprived areas.

Several wards, such as Hertford Sele, experience a number of poorer health outcomes than the district as a whole.
The health of our population: East Hertfordshire

Key numbers

Smoking in pregnancy
92 new mothers were smokers at the time of delivery in 2016/17

Diabetes
33.6% of diabetics aged 17+ were estimated to be undiagnosed in 2017

Childhood obesity
194 schoolchildren in Year 6 were obese in 2016/17

Self-harm
There were 79 emergency hospital admissions for intentional self-harm in 2016/17

Physical activity
26.7% of adults (aged 19+) were not physically active in 2016/17

Hip fractures
There were 164 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: East Hertfordshire
Statistically significant trends in key indicators

Getting better

- Children in low income families (under 16s)
- Under 18 conceptions
- New sexually transmitted infections (STIs)

Getting worse

- Employment rate (aged 16-64)
- Violent crime
The health of our population: East Hertfordshire
Key improvements to aim for

Increasing physical activity
Reducing violent crime
Reducing smoking in vulnerable groups
Diagnosing unrecorded diabetes
The health of our population: Hertsmere Borough Council
The health of our population: Hertsmere

Overview

Health in summary

The health of people in Hertsmere is generally better than the England average.

About 11% (2,200) of children live in low income families.

Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 9.3 years lower for men and 6.3 years lower for women in the most deprived areas of Hertsmere than in the least deprived areas.

Several wards, such as Borehamwood Cowley Hill, experience a number of poorer health outcomes than the borough as a whole.
### The health of our population: Hertsmere

#### Key numbers

<table>
<thead>
<tr>
<th>Region</th>
<th>Key Number</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Smoking in pregnancy</strong></td>
<td>69 new mothers were smokers at the time of delivery in 2016/17</td>
</tr>
<tr>
<td><strong>Diabetes</strong></td>
<td>28.4% of diabetics aged 17+ were estimated to be undiagnosed in 2017</td>
</tr>
<tr>
<td><strong>Childhood obesity</strong></td>
<td>156 schoolchildren in Year 6 were obese in 2016/17</td>
</tr>
<tr>
<td><strong>Self-harm</strong></td>
<td>There were 125 emergency hospital admissions for intentional self-harm in 2016/17</td>
</tr>
<tr>
<td><strong>Physical activity</strong></td>
<td>37.0% of adults (aged 19+) were not physically active in 2016/17</td>
</tr>
<tr>
<td><strong>Hip fractures</strong></td>
<td>There were 120 emergency admissions for hip fracture in people aged 65+ in 2016/17</td>
</tr>
</tbody>
</table>
The health of our population: Hertsmere
Statistically significant trends in key indicators

Getting better

- Cancer diagnosed at early stage
- Smoking status at time of delivery
- Children in low income families (under 16s)
- Under 18 conceptions
- Employment rate (aged 16-64)
- New sexually transmitted infections (STIs)

Getting worse

- Violent crime
The health of our population: Hertsmere
Key improvements to aim for

- Increasing physical activity
- Reducing violent crime
- Reducing smoking in vulnerable groups
- Diagnosing unrecorded diabetes
The health of our population: North Hertfordshire District Council
The health of our population: North Hertfordshire
Overview

Health in summary

The health of people in North Hertfordshire is generally better than the England average.

North Hertfordshire is one of the 20% least deprived districts/unitary authorities in England; however, about 11% (2,600) of children live in low income families.

Life expectancy for men is higher than the England average.

Health inequalities

Life expectancy is 3.1 years lower for men and 2.9 years lower for women in the most deprived areas of North Hertfordshire than in the least deprived areas.

Several wards, such as Letchworth Wilbury and Letchworth Grange, experience a number of poorer health outcomes than the district as a whole.
The health of our population: North Hertfordshire

Key numbers

**Smoking in adults**
96 new mothers were smokers at the time of delivery in 2016/17

**Diabetes**
28.6% of diabetics aged 17+ were estimated to be undiagnosed in 2017

**Childhood obesity**
186 schoolchildren in Year 6 were obese in 2016/17

**Self-harm**
There were 134 emergency hospital admissions for intentional self-harm in 2016/17

**Physical activity**
32.4% of adults (aged 19+) were not physically active in 2016/17

**Hip fractures**
There were 151 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: North Hertfordshire
Statistically significant trends in key indicators

Getting better

• Children in low income families (under 16s)
• Employment rate (aged 16-64)
• Under 18 conceptions

Getting worse

• Statutory homelessness
• Violent crime
The health of our population: North Hertfordshire
Key improvements to aim for

- Increasing physical activity
- Reducing violent crime
- Reducing smoking in vulnerable groups
- Diagnosing unrecorded diabetes
The health of our population: St Albans City & District Council
The health of people in St Albans is generally better than the England average.

St Albans is one of the 20% least deprived districts/unitary authorities in England; however, about 8% (2,300) of children live in low income families.

Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 6.7 years lower for men and 7.1 years lower for women in the most deprived areas of St Albans than in the least deprived areas.

Several wards, such as London Colney and Sopwell, experience a number of poorer health outcomes than the district as a whole.
The health of our population: St Albans

Key numbers

**Smoking in pregnancy**
97 new mothers were smokers at the time of delivery in 2016/17

**Diabetes**
36.5% of diabetics aged 17+ were estimated to be undiagnosed in 2017

**Childhood obesity**
180 schoolchildren in Year 6 were obese in 2016/17

**Self-harm**
There were 150 emergency hospital admissions for intentional self-harm in 2016/17

**Physical activity**
27.0% of adults (aged 19+) were not physically active in 2016/17

**Hip fractures**
There were 152 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: St Albans
Statistically significant trends in key indicators

Getting better

• Children in low income families (under 16s)
• Smoking status at time of delivery
• Breastfeeding initiation
• New sexually transmitted infections (STIs)
• Under 18 conceptions

Getting worse

• Employment rate (aged 16-64)
• Violent crime
The health of our population: St Albans
Key improvements to aim for

- Increasing physical activity
- Reducing violent crime
- Reducing unemployment
- Diagnosing unrecorded diabetes
The health of our population: Stevenage Borough Council
Health in summary

The health of people in Stevenage is varied compared with the England average.

About 16% (2,900) of children live in low income families.

Life expectancy for women is lower than the England average.

Health inequalities

Life expectancy is 7.4 years lower for men in the most deprived areas of Stevenage than in the least deprived areas.

Several wards, such as Bedwell and Symonds Green, experience a number of poorer health outcomes than the district as a whole.
<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking in pregnancy</td>
<td>68 new mothers were smokers at the time of delivery in 2016/17</td>
</tr>
<tr>
<td>Childhood obesity</td>
<td>185 schoolchildren in Year 6 were obese in 2016/17</td>
</tr>
<tr>
<td>Physical activity</td>
<td>33.1% of adults (aged 19+) were not physically active in 2016/17</td>
</tr>
<tr>
<td>Diabetes</td>
<td>22.5% of diabetics aged 17+ were estimated to be undiagnosed in 2017</td>
</tr>
<tr>
<td>Self-harm</td>
<td>There were 129 emergency hospital admissions for intentional self-harm in 2016/17</td>
</tr>
<tr>
<td>Hip fractures</td>
<td>There were 96 emergency admissions for hip fracture in people aged 65+ in 2016/17</td>
</tr>
</tbody>
</table>
The health of our population: Stevenage
Statistically significant trends in key indicators

Getting better

- Children in low income families (under 16s)
- Under 18 conceptions

Getting worse

- Breastfeeding initiation
- Violent crime
- Obese children (aged 10-11)
- Employment rate (aged 16-64)
The health of our population: Stevenage
Key improvements to aim for

- Increasing physical activity and tackling child obesity
- Reducing violent crime
- Improving educational attainment
- Increasing breastfeeding uptake
The health of our population: Three Rivers District Council
The health of our population: Three Rivers
Overview

Health in summary

The health of people in Three Rivers is generally better than the England average.

Three Rivers is one of the 20% least deprived districts/unitary authorities in England; however, about 10% (1,600) of children live in low income families.

Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 7.5 years lower for men and 7.9 years lower for women in the most deprived areas of Three Rivers than in the least deprived areas.

South Oxhey ward, experiences a number of poorer health outcomes than the district as a whole.
The health of our population: Three Rivers

Key numbers

- **Smoking in pregnancy**: 57 new mothers were smokers at the time of delivery in 2016/17
- **Childhood obesity**: 137 schoolchildren in Year 6 were obese in 2016/17
- **Physical activity**: 31.8% of adults (aged 19+) were not physically active in 2016/17
- **Diabetes**: 25.0% of diabetics aged 17+ were estimated to be undiagnosed in 2017
- **Self-harm**: There were 110 emergency hospital admissions for intentional self-harm in 2016/17
- **Hip fractures**: There were 100 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: Three Rivers
Statistically significant trends in key indicators

Getting better
- Children in low income families (under 16s)
- Smoking status at time of delivery
- Employment rate (aged 16-64)
- Under 18 conceptions
- New sexually transmitted infections (STIs)

Getting worse
- Violent crime
The health of our population: Three Rivers
Key improvements to aim for

- Increasing physical activity
- Reducing violent crime
- Reducing smoking in vulnerable groups
- Diagnosing unrecorded diabetes
The health of our population: Watford Borough Council
The health of our population: Watford

Overview

Health in summary

The health of people in Watford is varied compared with the England average.

About 12% (2,300) of children live in low income families.

Life expectancy for both men and women is similar to the England average.

Health inequalities

Life expectancy is 6.6 years lower for men and 3.4 years lower for women in the most deprived areas of Watford than in the least deprived areas.

Some wards, such as Holywell and Woodside, experience a number of poorer health outcomes than the district as a whole.
The health of our population: Watford
Key numbers

Smoking in pregnancy
80 new mothers were smokers at the time of delivery in 2016/17

Diabetes
11.1% of diabetics aged 17+ were estimated to be undiagnosed in 2017

Childhood obesity
230 schoolchildren in Year 6 were obese in 2016/17

Self-harm
There were 118 emergency hospital admissions for intentional self-harm in 2016/17

Physical activity
32.0% of adults (aged 19+) were not physically active in 2016/17

Hip fractures
There were 68 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: Watford
Statistically significant trends in key indicators

Getting better
• Children in low income families (under 16s)
• Smoking status at time of delivery
• Under 18 conceptions
• New sexually transmitted infections (STIs)

Getting worse
• Violent crime
• Employment rate (aged 16-64)
The health of our population: Watford

Key improvements to aim for

- Increasing physical activity and tackling child obesity
- Reducing violent crime
- Reducing smoking in vulnerable groups
- Reducing unemployment
The health of our population: Welwyn Hatfield Borough Council
Health in summary

The health of people in Welwyn Hatfield is varied compared with the England average.

About 14% (2,800) of children live in low income families.

Life expectancy for both men and women is higher than the England average.

Health inequalities

Life expectancy is 8.9 years lower for men and 8.9 years lower for women in the most deprived areas of Welwyn Hatfield than in the least deprived areas.

Some wards, such as Peartree and Welham Green & Hatfield South, experience a number of poorer health outcomes than the district as a whole.
Smoke in pregnancy
78 new mothers were smokers at the time of delivery in 2016/17

Diabetes
30.0% of diabetics aged 17+ were estimated to be undiagnosed in 2017

Childhood obesity
175 schoolchildren in Year 6 were obese in 2016/17

Self-harm
There were 106 emergency hospital admissions for intentional self-harm in 2016/17

Physical activity
36.5% of adults (aged 19+) were not physically active in 2016/17

Hip fractures
There were 113 emergency admissions for hip fracture in people aged 65+ in 2016/17
The health of our population: Welwyn Hatfield
Statistically significant trends in key indicators

Getting better

- Children in low income families (under 16s)
- Statutory homelessness
- New sexually transmitted infections (STIs)
- Employment rate (aged 16-64)
- Under 18 conceptions

Getting worse

- Violent crime
The health of our population: Welwyn Hatfield

Key improvements to aim for

- Increasing physical activity
- Reducing violent crime
- Reducing smoking in vulnerable groups
- Diagnosing unrecorded diabetes
Hertfordshire Health Evidence
Our local health intelligence website

- local health data hub at hertshealthevidence.org
- data briefing notes and tools to download
- includes ward level data for each Hertfordshire district and borough
“My 2018/19 Annual Report highlights a selection of the indicators by which we measure the health of our population. It shows variations in health across the county and outcomes in which we’re seeing meaningful improvements over time, as well as some which present an increasing challenge.

To find out what we’re doing to improve local outcomes, check out our current Public Health Strategy.”

Prof. Jim McManus
Director of Public Health